



INDIVIDUAL ADVOCATE APPLICATION

TEXAS
JUVENILE
JUSTICE
DEPARTMENT

Personal Information

Name (Last, First, Middle)		Suffix (e.g., Jr.)	Other Names Used	
Address	Apt. #	City	State	Zip
Primary Phone #	Work Phone #		Is it okay to receive calls at work? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Email Address			Fax #	
Have you or anyone you know been employed by TJJD?		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you or anyone you know been enrolled in the TJJD volunteer program?		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you or anyone you know been committed to the custody of TJJD?		<input type="checkbox"/> Yes <input type="checkbox"/> No		
If you answered "Yes" to any question above, please provide detail.				

The following information is required to conduct background checks and/or for statistical analysis

Social Security Number		TX Driver's License #		Driver's License Class	Maiden Name (if Married)	
Date of Birth	Place of Birth (state only)	Height	Weight	Hair Color	Eye Color	
<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Married <input type="checkbox"/> Widowed	<input type="checkbox"/> Single <input type="checkbox"/> Divorced	<input type="checkbox"/> Caucasian <input type="checkbox"/> African-American	<input type="checkbox"/> Hispanic <input type="checkbox"/> Asian	<input type="checkbox"/> Other	

Special Accommodations

Do you require any special accommodation in order to deliver your services?
☐ Yes ☐ No If yes, please explain:

Emergency Contact – In the event of an emergency, indicate the person to be notified

Name	Relationship	Daytime Phone #	Home Phone #
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Criminal Record Check

Have you ever been convicted of a felony or misdemeanor? ☐ Yes ☐ No
Are you currently charged with a felony or misdemeanor? ☐ Yes ☐ No
If you answered Yes above, briefly describe the circumstances of your conviction or current charge, indicating the date, nature, and place of the offense and disposition of the case.

Name of advocacy or service organization with which you are affiliated.

